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| an address represented by a Customer Number purposes (hereafter, fee address). A fee admaintenance fees should be mailed to a application.  When to check the first box below: If you have the check the second box below: If address, in which case a completed Request form. For more information on Customer Num §403. | per can be est<br>dress should<br>different addre<br>ve a Custome<br>you have no<br>for Customer<br>nbers, see the | Customer Number representing the desired fee Number (PTO/SB/125) must be attached to this Manual of Patent Examining Procedure (MPEP) |
| For the following listed application(s), please red 1.363 the address associated with:                                                                                                                                                                                                                                    | ognize as the                                                                                                      | ree Address under the provisions of 37 CFR                                                                                            |
| ☑ Customer Number:                                                                                                                                                                                                                                                                                                        | 22971                                                                                                              |                                                                                                                                       |
| OR                                                                                                                                                                                                                                                                                                                        |                                                                                                                    | · · · · · · · · · · · · · · · · · · ·                                                                                                 |
| The attached Request for Customer Nu                                                                                                                                                                                                                                                                                      | mber (PTO/SI                                                                                                       | 3125) form.                                                                                                                           |
| PATENT NUMBER<br>(if known)                                                                                                                                                                                                                                                                                               |                                                                                                                    | APPLICATION NUMBER                                                                                                                    |
|                                                                                                                                                                                                                                                                                                                           |                                                                                                                    | 10/769,103                                                                                                                            |
| Completed by (check one)                                                                                                                                                                                                                                                                                                  | · · · · · · · · · · · · · · · · · · ·                                                                              | (2/1) n 6                                                                                                                             |
| Applicant/Inventor                                                                                                                                                                                                                                                                                                        |                                                                                                                    | Signature                                                                                                                             |
| Attorney or Agent of record 28,651 (Red. No                                                                                                                                                                                                                                                                               | <u> </u>                                                                                                           | Rick D. Nydegger                                                                                                                      |
| Assignee of record of the entire interest. 37 CFR 3.71. Statement under 37 CFR 3                                                                                                                                                                                                                                          | See                                                                                                                | Typed or printed name 801-533-9800                                                                                                    |
| is enclosed. (Form PTO/SB/96)  Assignee recorded at Reel France                                                                                                                                                                                                                                                           | າ                                                                                                                  | Requester's telephone number                                                                                                          |
| NOTE: Signatures of all the inventors or assignees                                                                                                                                                                                                                                                                        | of record of the e                                                                                                 | Date ntire interest or their representative(s) are required. Submit                                                                   |

This collection of information is required by 37 CFR 1.363. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 5 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending on the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop M Correspondence, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

multiple forms if more than one signature is required, see below\*.

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